

FILE COPY

Form PTO-1595
(Rev. 03/01)

RECORDATION FORM COVER SHEET
PATENTS ONLY

U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Trademark Office
2-

OMB No. 0651-0027 (exp. 5/31/2002)

Tab settings ⇌ ⇌ ⇌ ▼ ▼ ▼ ▼ ▼ ▼ ▼

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Germaine Caprio

2. Name and address of receiving party(ies):

Name: **Raggle, Inc.**

Internal Address: _____

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

3. Nature of conveyance:



Assignment



Merger



Security Agreement



Change of Name



Other _____

Street Address: **147 N. Humphrey Ave.**

City: **Oak Park** State: **IL** Zip: **60302**

Execution Date: _____

Additional name(s) & address(es) attached? ☐ Yes ☒ No

4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is: **1-28-02**

A. Patent Application No.(s)

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: **Leon I. Edelson, Esq.**

Internal Address: **Levenfeld Pearlstein**

Street Address: **P.O. Box 0212**

City: **Chicago** State: **IL** Zip: **60690-0212**

6. Total number of applications and patents involved: **1**

7. Total fee (37 CFR 3.41).....\$ _____



Enclosed



Authorized to be charged to deposit account

8. Deposit account number:

502035

(Attach duplicate copy of this page if paying by deposit account)

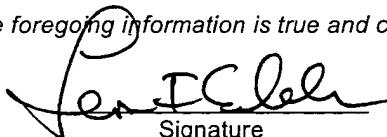
DO NOT USE THIS SPACE

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.



Name of Person Signing



Signature

2-5-02

Date

Total number of pages including cover sheet, attachments, and documents: **3**

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patents & Trademarks, Box Assignments
Washington, D.C. 20231

EXPRESS MAIL CERT. # EV 024102154 US



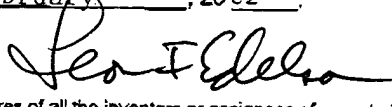
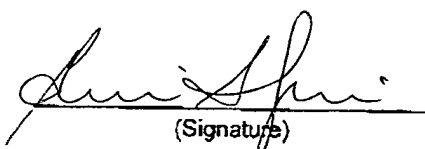
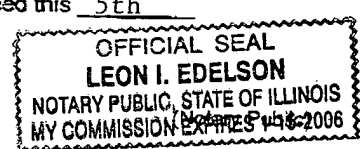
RECORDATION FORM COVER SHEET PATENTS ONLY		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office
PTO-1595 (Rev. 03/01) OMB No. 0651-0027 (exp. 5/31/2002) Tab settings ⇌ ⇌ ⇌ ▼ ▼ ▼ ▼ ▼ ▼ ▼		2-
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.		
1. Name of conveying party(ies): Germaine Caprio Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Name and address of receiving party/ Name: Raggle, Inc. Internal Address: _____ Street Address: 147 N. Humphrey Ave. City: Oak Park State: IL Zip: 60302 Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____ Execution Date: _____	4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: 12-28-02 A. Patent Application No.(s) B. Patent No.(s) Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Leon I. Edelson, Esq. Internal Address: Levenfeld Pearlstein Street Address: P.O. Box 0212 City: Chicago State: IL Zip: 60690-0212	6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 3.41).....\$ _____ <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account 8. Deposit account number: 502035 (Attach duplicate copy of this page if paying by deposit account)	
DO NOT USE THIS SPACE		
9. Statement and signature. <i>To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.</i> Leon I. Edelson Leon I. Edelson 2-5-02 Name of Person Signing Signature Date Total number of pages including cover sheet, attachments, and documents: 3		

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patents & Trademarks, Box Assignments
Washington, D.C. 20231

EXPRESS MAIL CERT. # EV024102154 US

EXP. MAIL CERT#
EV 0241021544

Sample Form (former PTO/SB/15) (05-01)

ASSIGNMENT OF APPLICATION	Docket Number (Optional) 31287-36223
<p>Whereas, I/We, <u>GERMAINE CAPRIO</u> of <u>Oak Park, Illinois</u>, hereafter referred to as applicant, have invented certain new and useful improvements in <u>NURSING GARMENT AND SUPPORT BRA</u></p> <p><input type="checkbox"/> for which an application for a United States Patent was filed on _____ Application Number _____/_____</p> <p><input checked="" type="checkbox"/> for which an application for a United States Patent was executed on <u>1-28-02</u>, and</p> <p>Whereas, <u>RAGGLE, INC.</u> of <u>Oak Park, Illinois 60302</u> herein referred to "assignee" whose mailing address is <u>147 N. Humphrey Avenue,</u> is desirous of acquiring the entire right, title and interest in the same;</p> <p>Now, therefore, in consideration of the sum of <u>ten</u> dollars (\$<u>10.00</u>), the receipt whereof is acknowledged, and other good and valuable consideration, I/We, the applicant(s), by these presents do sell, assign and transfer unto said assignee the full and exclusive right to the said invention in the United States and the entire right, title and interest in and to any and all Patents which may be granted therefor in the United States, I/We hereby authorize and request the Commissioner of Patent and Trademarks to issue said United States Patent to said assignee, of the entire right, title, and interest in and to the same, for his sole use and behoof; and for the use and behoof of his legal representatives, to the full end of the term for which said Patent may be granted, as fully and entirely as the same would have been held by me had this assignment and sale not been made.</p> <p>Executed this <u>5th</u> day of <u>February</u>, 2002 at <u>Chicago, Illinois</u></p> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="width: 45%;"> <p>State of <u>Illinois</u>) County of <u>Cook</u>) SS:</p> <p>Before me personally appeared said <u>Germaine Caprio</u> and acknowledged the foregoing instrument to be ^{her} his free act and deed this <u>5th</u> day of <u>February</u>, 2002.</p> <p>Seal </p> </div> <div style="width: 45%; text-align: center;">  (Signature) </div> </div> <div style="text-align: right; margin-top: 10px;">  </div>	
<p>Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.</p> <p>* <input type="checkbox"/> Total of _____ forms are submitted.</p>	

This form offers a sample or suggested format for an assignment document. This sample form is not an OMB officially approved form.